TREATMENT PROTOCOL: HYPERTHERMIA (ENVIRONMENTAL)

- 1. Basic airway
- 2. Pulse oximetry
- 3. Oxygen prn
- 4. Provide active cooling measures prn
 - Move to cool environment
 - Remove clothing
 - Apply wet towels and promote cooling by fanning
- 5. Cardiac monitor: document rhythm and attach ECG strip if dysrhythmia identified
- 6. Advanced airway prn

ADEQUATE PERFUSION **POOR PERFUSION** 7. Encourage oral fluids 7. Venous access Venous access prn Blood glucose test 8. 8. ESTABLISH BASE CONTACT (ALL) If blood glucose is less than 60mg/dl: 9. 9. Consider oral glucose preparation if 10. If unable to take fluids orally: Normal Saline patient is awake and alert 11. ESTABLISH BASE CONTACT (ALL) Dextrose 10% 250 mL IV Infuse 125mL, and reassess 12. If unable to take fluids orally: If positive response, stop infusion Normal Saline fluid challenge If minimal or no response, infuse the 10mL/kg IV, reassess for pulmonary remaining 125mL for a total of 250mL edema at each 250mL increments Pediatric: Dextrose 10% per Color 13. Reassess for potential deterioration **Code Drug Doses LA County Kids** 1mL/kg increments up to 5mL/kg If unable to obtain venous access: Glucagon 1mg IM Pediatric: Glucagon per Color Code Drug Doses LA County Kids 0.5mg (0.5mL) IM < 1vear 1mg (1mL) IM 1 year or older 10. ESTABLISH BASE CONTACT (ALL) 11. Normal Saline fluid resuscitate IV wide open 12. If blood glucose remains less than 60mg/dl, Dextrose 10% 250mL IV Infuse 125mL, and reassess If positive response, stop infusion If minimal or no response, infuse the remaining 125mL for a total of 250mL Pediatric: Dextrose 10% per Color **Code Drug Doses LA County Kids** 1mL/kg increments up to 5mL/kg If unable to obtain venous access: Glucagon 1mg IM Pediatric: Glucagon per Color Code Drug Doses LA County Kids 0.5mg (0.5mL) IM < 1year 1mg (1mL) IM 1 year or older

EFFECTIVE DATE: 7-1-11 REVISED: 08-01-17 SUPERSEDES: 04-01-17